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PTO/SB/21 (09-04)

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/505,721	
	Filing Date	February 17, 2006	
	First Named Inventor	Joseph A. Giordano	
	Art Unit	3628	
	Examiner Name	Clement B. Graham	
Total Number of Pages in This Submission	99	Attorney Docket Number	P1099J074-US2

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks PTO Form 1449 (PTO/SB/08A), a copy of the Supplementary Partial European Search Report, and cited references.		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	ExxonMobil Research and Engineering Company	
Signature	<i>W. Robinson H. Clark</i>	
Printed name	W. Robinson H. Clark	
Date	August 4, 2006	Reg. No. 41,530

CERTIFICATE OF TRANSMISSION/MAILING	
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Date	08/04/06

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PTO/ISB/17 (01-08)

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Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

**FEE TRANSMITTAL
For FY 2006**☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 180.00

Complete if Known

Application Number 09/505,721
 Filing Date February 17, 2000
 First Named Inventor Joseph A. Giordano
 Examiner Name Clement B. Graham
 Art Unit 3763
 Attorney Docket No. P1999J074-US2

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____
☒ Deposit Account Deposit Account Number: 05-1330 Deposit Account Name: ExxonMobil Research & Eng
 For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)
☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☐ Credit any overpayments

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FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Small Entity		Fees Paid (\$)
	Fee (\$)	Fee (\$)	
Each claim over 20 (including Reissues)		50	25
Each independent claim over 3 (including Reissues)		200	100
Multiple dependent claims		360	180
Multiple Dependent Claims		Fees Paid (\$)	
- 20 or HP =	x		
HP = highest number of total claims paid for, if greater than 20.			
Indep. Claims		Fees Paid (\$)	
- 3 or HP =	x		
HP = highest number of independent claims paid for, if greater than 3.			

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).
 Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$): Fees Paid (\$):
 - 100 = / 50 = (round up to a whole number) x

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): JDS

Fees Paid (\$)

\$180.00

SUBMITTED BYSignature W. Robinson H. Clark

Registration No. (Attorney/Agent) 41,530

Telephone 703-846-5114

Name (Print/Type) W. Robinson H. Clark

Date August 4, 2006

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CENTRAL FAX CENTERSerial No.: 09/505,721
Family Number: P1999J074-US2

AUG 4 2006

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application of: Joseph A. Giordano et al.
U. S. Serial No.: 09/505,721
Filed: February 17, 2000
For: System And Method For Processing Financial Transactions
Conf No.: 7099
Group Art Unit: 3628
Examiner: Clement B. Graham

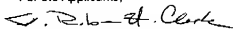
Commissioner for Patents
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Alexandria, VA 22313-1450

Information Disclosure Statement

Sir:

The references cited in the attached PTO Form 1449 are relevant to the examination of this application; they were first cited in a Supplemental Partial European Search Report from the European Patent Office which was made in respect of the counterpart international application in the European Patent Office. The Search Report, a copy of which is enclosed with this Statement, was received in this office on 20 July 2006.

For the Applicants,



Attorney for Applicant(s)
Registration No. 41,530
Telephone Number: (703) 846-5114
Facsimile Number: (703) 846-7799
☐ Pursuant to 37 CFR 1.34(a)

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Date of Deposit: August 4, 2006

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